

Volume 2, Issue 1 February, 2001

State Veterinarian's Column

Welcome to the second issue of the *Animal Industry News* newsletter. It has been almost a year since our last newsletter. I hope that you enjoy the newsletter, maybe even find it useful, and most important, will provide me with some feedback. I consider the veterinary profession to be a very important constituent group with goals common to the department and a similar vested interest in a thriving, profitable animal agriculture industry in Iowa. It has been a very busy year for the Animal Industry bureau, and much has happened.

Pseudorabies. We have seen a major legislative initiative enacted that significantly changed the program. The new legislation did some things which were universally regarded as necessary and positive – increasing the level of testing of swine production sites for the disease and mandatory vaccination of swine in Stage II counties of Iowa. The legislation also severely restricted movement of animals from known infected herds and animals without a current known status. Infected breeding herds must conduct a test-and-removal herd plan. The department has tried to provide timely, accurate disease information on our web site (www.state.ia.us/agriculture) – update maps showing the location of known infected sites, maps showing the location of newly found sites, etc. We are working to provide quick responses to new foci of infection with producers and practicing veterinarians. The federal buy-out program (APEP) is still available, and greater flexibility has been afforded the Iowa program to allow for whole herd buyouts once again. We need your help to encourage and promote the continued use of vaccine as insurance against becoming infected at a time when infected herds are being further restricted.

Johne's. The department has put forth a decision package (\$325,000) to the Iowa legislature for increased funding for a voluntary Johne's testing and education program for the dairy industry. The 1996 National Animal Health Monitoring System study of dairy producers found that Johne's affected between 24-42% of Iowa producers, based on testing sufficient to detect herds with at least 10% infection with 90% confidence. Economic analysis revealed that infection at this level costs the producer \$227 for every cow in their herd per year (\$18,000+ for an 80 cow herd). This translates into losses of \$15-26 million for the Iowa dairy industry. (Continued on page 12)

PATTY JUDGE

SECRETARY OF AGRICULTURE

BRENT HALLING

DEPUTY SECRETARY OF AGRICULTURE

RONALD ROWLAND REGULATORY DIVISION



Iowa State Fair -IT'S A WINNER!

DIRECTOR
JOHN J. SCHILTZ,
D.V.M.
STATE VETERINARIAN

DAVID D. SCHMITT, D.V.M. ASSISTANT STATE

VETERINARIAN

LAWRENCE BIRCHMIER, D.V.M.

PSEUDORABIES PROGRAM
COORDINATOR



PATTY JUDGE PRV Testing, PI
SECRETARY OF AGRICULTURE PRV Infect Map

2001 Exhibition Regulations

Enclosed with this newsletter are the animal health regulations for the 2001 exhibition season. There are no changes from last year.

Shows and/or fairs which include more than one county must follow the regulations for the State Fair and District Shows. For those exhibitions involving only one county, the County 4-H/FFA Fair regulations will apply.

Please distribute these exhibition requirements to your members and any other interested individuals. These exhibition regulations can also be found at our web site: www.state.ia.us/agriculture.

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In early January, Secretary

Animal Industry Enforcement Actions Ronald Rowland, Regulatory Division Director

Judge announced a summary of the Department's PRV enforcement actions since July 1, 2000. She also announced that effective February 1, 2001, the Department will be moving away from first issuing a warning letter to most producers who are in violation of the pseudorabies requirements. Instead of a warning letter, the Department will commence requiring the payment of civil penalties by those in violation.

Since July 1, 2000, the Department has fined 21 producers a total of \$18,768 for violations ranging from illegal movement of swine from infected herds, to failure to

vaccinate, and the failure to maintain a current test status. Five producers paid fines in excess of \$1000 and some up to \$2500. In addition, 178 letters of warning have been sent to producers who were initially found to be in violation, but who quickly brought themselves into compliance once they were contacted.

The Department is committed to enforcing compliance with the pseudorabies requirements. Most producers are and will continue to voluntarily comply with the requirements. The Department appreciates these efforts and pledges to

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General Information 515.281.5304

Iowa Brands Registration Program News Karen Gideon, Brands Recorder

Chapter 169.1(1) "Brand" means an identification mark that is burned into the hide of a live animal by a hot iron or another method approved by the secretary. A brand shall include a cryobrand.

Chapter 169A, Marking and Branding of Livestock, was enacted as a brand registration program in 1965 by the Iowa Department of Agriculture and Land Stewardship (IDALS). Currently, there are 3,209 active brands registered in Iowa.

In Year 2000, 91 new brand certificates and 67 transfer of title/ownership were issued. Also, 398 brand renewal notifications were mailed for the 2001 licensing year, and as of January 1st, 300 have renewed, 6 have cancelled.

IDALS is still in the process of updating the computer program to allow internet access to the current listing of all brands registered with the Iowa Department of Agriculture. It is a very slow and tedious process having to redraw every brand.

To register a brand in Iowa, the fee is \$15.00, with renewal every 5 years for \$5.00. Transfer of ownership fee is \$5.00. For brand information, or to receive an application to register a brand, or transfer of title/ownership form, contact:

Karen Gideon, Brand Recorder IDALS, Bureau of Animal Industry Wallace Building, 2nd Floor Des Moines, Iowa 50319 515/281-8617

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Walter D. Felker, DVM

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STATE LIVESTOCK INSPECTORS

Doug Anderson Wayne Grier Stan Lamoureux Nicole Snider Dave Watson

Iowa Board of Veterinary Medicine - 2000 Summary

Twelve cases initiated in 1999 were resolved in 2000. Thirty-six (36) complaints were received in 2000. Seventeen cases were carried over to 2001, including one initiated in 1998.

In fourteen (14) cases, veterinary board members determined that the evidence obtained from the investigation did not provide probable cause to believe any violations occurred. No further action was recommended. In these fourteen cases, the nature of the grievances were as follows:

- * In one case, the client alleged misdiagnosis and mistreatment of their dog (99-20).
- * In another, the complaint alleged concerns regarding a veterinarian employed by a non-veterinarian owner (99-28).
- * In another, the client alleged improper administration of anthelmintics to the clients' dogs, resulting in their death (99 -29).
- * In another, the client alleged misdiagnosis of pregnancy in a feline (00-01).
- * In another, the client alleged the practitioner performed a spay on a dog previously spayed, and failed to notify the client of their findings (00-02).
- * In another, the complaint alleged performance of equine dentistry procedures by a lay person (00-03).
- * In another, the client alleged unauthorized removal of two teeth in a puppy and un-necessary revaccination (00-04).
- * In another, the client alleged that the leg injury of their dog had been misdiagnosed (00-07).
- In another, the client alleged unsanitary conditions and unprofessional conduct (00-12).
- * In another, the client alleged poor

- communication regarding possible side effects of medication (00-15).
- * In two others, the clients alleged overcharging (00-16 & 00-20).
- * In another, the client alleged lack of competence following a complication of an orthopedic procedure (00-22).
- * In another, the client alleged improper care of their dogs while being boarded (00 -24).

In eighteen (18) cases, board members have determined that the evidence obtained from the investigation did provide probable cause to believe that a violation may have occurred. In each of these cases, the nature of the grievance and the resolution of the case were as follows:

Case No. 98.005 arose from a complaint alleging incompetence, accreditation violations, unethical conduct, and willful or repeated departure from minimal standards of acceptable and prevailing care. Evidence obtained during the investigation did provide probable cause to believe that violations occurred relative to standards of care, unethical practice, off-label use of medication, and veterinary-client-patient-relationship (VCPR). A statement of charges has been filed and the case is set for hearing before the Board.

Case 99.010 This case alleged the practitioner knowingly made misleading, deceptive, untrue or fraudulent representations and signed health certificates which falsified pseudorabies testing dates and pseudorabies status. Evidence from the investigation found probable cause that the allegations were supported. A statement of charges was prepared and filed. The case was resolved through an informal settlement resulting in license probation for two years, a \$500 civil penalty, and ten hours of continuing education in veterinary ethics.

Case 99.012 This case alleged prescribing medication without a valid VCPR. Evidence from the investigation found probable cause that medication was being prescribed without a valid VCPR. A statement of charges was

(Continued on page 4)

Iowa Board of Veterinary Medicine - 2000 Summary, cont.

(Continued from page 3)

prepared and filed. The case is scheduled for hearing at this time.

Case 99.013 This case alleged prescribing medication without a valid VCPR; and departure from, or failure to conform to, the minimal standards of acceptable and prevailing practice. Evidence from the investigation found probable cause that medication was being prescribed without a valid VCPR. A statement of charges was prepared and filed. The case was resolved through an informal settlement resulting in license probation for one year, a \$1,000 civil penalty, and fifteen hours of continuing education in veterinary ethics.

Case 99.016 This case alleged departure from, or failure to conform to, the minimal standards of acceptable and prevailing practice. Evidence from the investigation found probable cause that the allegations were founded and that record-keeping was deficient. The case was resolved through a confidential letter of warning.

Case 99.019 This case alleged unethical conduct. Evidence from the investigation found probable cause that unethical conduct had occurred. The case was closed with a confidential letter of warning.

Case 99.024 This case alleged a lay person administering rabies vaccine. Evidence from the investigation found probable cause that a lay person was administering rabies vaccine. The case was closed with a cease and desist letter.

Case 99.025 This case alleged inadequate monitoring and record-keeping for controlled substances, and departure from accepted standards of care in treatment and monitoring of a patient. Evidence from the investigation found probable cause for the allegations. The case was closed with a confidential letter of warning.

Case 99.026 This case alleged violation of accepted practice standards by allowing someone other than a veterinarian to administer rabies vaccine, and failure to obtain consent for veterinary procedures. Evidence from the investigation found probable cause to support the allegations. The case was closed with a confidential letter of warning.

Case 99.027 This case alleged discipline taken against the licensee in another state. Evidence from the investigation found probable cause to support the allegation. A statement of charges was prepared and filed. The case was resolved through an informal settlement resulting in indefinite license suspension, with no possibility of reinstatement prior to June 19, 2002. Reinstatement, if allowed, is subject to terms and conditions, including probation.

Case 00.006 This case alleged inadequate record-keeping, failure to obtain consent for surgery, and failure to conform to

standards of care in the follow-up care of the patient. Evidence from the investigation found probable cause to support the allegations. The case was resolved through a confidential letter of warning.

Case 00.008 This case alleged willful or repeated departure from and the failure to conform to minimal standards of acceptable and prevailing practice, failure to obtain consent for veterinary procedures, and inadequate record-keeping for controlled substances. Evidence from the investigation found probable cause to support the allegations. A statement of charges was prepared and filed. The case is scheduled for hearing.

Case 00.010 This case alleged discipline taken against the licensee in another state. The licensee failed to report the discipline within 30 days, as required. Evidence from the investigation found probable cause to support the allegation. The case was resolved through a confidential letter of warning.

Case 00.011 This case alleged inadequate record-keeping, including inadequate record-keeping for controlled substances, and not obtaining informed consent for veterinary procedures. Evidence from the investigation found probable cause to support the allegation. The case was resolved through a confidential letter of warning.

Case 00.014 This case alleged discipline taken against the licensee in another state. The licensee failed to report the discipline within 30 days, as required. Evidence from the investigation found probable cause to support the allegation. A statement of charges was prepared and filed. The case is scheduled for hearing.

Case 00.017 This case alleged inadequate record-keeping and departure from the standards of acceptable practice of veterinary medicine. Evidence from the investigation found probable cause to support the allegation. The case was resolved through a confidential letter of warning.

Case 00.018 This case alleged inadequate record-keeping and departure from the standards of acceptable practice of veterinary medicine. Evidence from the investigation found probable cause to support the allegation. The case was resolved through a confidential letter of warning.

Case 00.021 This case alleged inadequate record-keeping, performing veterinary procedures without informed consent, and departure from the standards of acceptable practice of veterinary medicine. Evidence from the investigation found probable cause to support the allegation. The case was resolved through a confidential letter of education.

The balance of the cases are currently being investigated or reviewed.

Currently, the deaprtment has 120 **KNOWN** infected herds/sites. This

September 30, 2000.

700

600

Pseudorabies Update Dr. Birchmier, Iowa's PR Czar

headquarters, ph. (515) 964-2735. Encourage your clients to test prior

number has been declining since mid-summer of 2000 at which time we were close to 600 known infected sites.

In order to identify pseudorabies positive sites, the department requires (at a minimum) all swine premises in Stage II counties to have a test current within six (6) months of any swine movement. To promote this testing requirement, January 1st the department mailed letters to all swine premises that had not tested since July 31, 2000. In conjunction with the monthly producer mailings, preprinted test charts will be issued to the producer's herd veterinarian. As of now, all swine producers will be allowed one statistical test of each site housing swine at program expense for the year 2001. The first of February, the department mailed requests to test to all sites whose last test was conducted between August 1 and

All swine sites in Stage III will also be statistically tested at program expense during calendar year 2001. Producers and veterinarians will be notified by the above method as to when this phase will be undertaken.

Vaccine: Remind your clients of the \$0.25 vaccine reimbursement available to them. Questions concerning vaccine vouchers should be addressed to the Ankeny APEP

Pseudorabies Infected Sites - Iowa

to their site expiration dates. With the requirement of swine sites in Stage II counties testing every six (6) months, delays can be expected both at the diagnostic lab in testing and at the department in data entry, so testing prior to the expiration date will help avoid frustration for all involved parties.

Please use your "veterinary list" of clients when using blank pseudorabies serology forms. If you don't have a "veterinary list," they are available from your district veterinarian. Premises locations (911 address, county, township, and section) and owner information (responsible management party) are very important information. This alleviates many of the problems of duplicate files and/or data entry into the wrong file. When possible, please try to use the preprinted charts we are sending to you.

A number of reports have come in to the office of producers combining other vaccines with pseudorabies vaccine in order to administer fewer injections. Now is not the time to compromise the efficacy of pseudorabies vaccine. Please advise your clients to avoid off-label uses of the vaccine. We have conducted investigations of vaccine compliance and found no serologic evidence of exposure to vaccine in cases where vaccines have been combined. Restrictions on infected herds

Feeder Pigs Imported 12,000,000 10,000,000 000,000,8 6,000,000 4,000,000 2,000,000 1884 1884 1884 1884 1884 1884

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FEDERAL VETERINARIANS

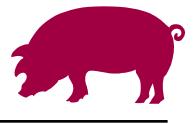
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500 400 300 200 100

Veterinary Clinic Certification

In response to passage of Senate File 419, 2000

Acts, the Iowa Veterinary Medical Association (IVMA) assembled a clinic certification task force to provide a proposed framework for implementation of a clinic certification program under the authority of the Iowa Board of Veterinary Medicine (Board). On January 18, 2001, the Executive Committee of the Iowa Veterinary Medicine Association voted to approve the task force proposals and forwarded the proposal to the Iowa Board of Veterinary Medicine. The IVMA task force was comprised of seven member veterinarians representing a cross section of veterinary practice types. The State Veterinarian and two Board members were exofficio members of the task force. Dr. Rex Wilhelm (past Chairman and member of the Board) served as Chairman of the task force.

The Board has reviewed the task force recommendations and submits the following as a proposed veterinary clinic certification program:

Program Elements:

Veterinary clinic certification would require all clinics where animals are examined or treated to be certified.

Ambulatory practices would be required to be certified.

Self-certification would be utilized in lieu of an inspection program.

Veterinary clinics would complete and submit a notarized self-certification form to the Board.

Inspections/investigations would be conducted under the following conditions:

- * upon receipt by the Board of a written complaint,
- * by request of the Board, and
- * within six months of a new clinic application for certification.

Certification will be for a three year period. Certification will be staggered upon initial application to facilitate management of the program for the Board and the department.

Criteria to be used to determine eligibility for certification includes (See self-certification form for complete breakdown of criteria and standards):

* Records. Each veterinary facility licensed by the board shall maintain in this state for at least 4 years a written record of each animal receiving veterinary services at the facility from any veterinarian providing veterinary services at the facility. The record must be available for inspection by the owner of the

animal during normal business hours. The licensed veterinarian in charge shall provide a copy of that record to the owner of the animal receiving veterinary services not later than two working days after the facility received a request from the owner of the animal. Food/Large Animal Practices

Food/Large Animal Practices Companion/Small Animal Practices Controlled substances dispensing records and maintenance

- * X-Rays. Each x-ray is the property of the veterinarian who caused it to be prepared. An x-ray must be released upon the written request of another veterinarian who has the authorization of the owner of the animal to which it pertains. X-rays should be released and returned in a reasonable time.
- Anesthesia. General anesthesia is a condition caused by the administration of a drug or combination of drugs sufficient to produce a state of unconsciousness or dissociation and blocked response to a given pain or alarming stimulus.

Each licensed veterinary facility shall use appropriate and humane methods of anesthesia, analgesia and sedation to minimize pain and distress during any procedures performed in the facility.

- * Veterinary facilities (except facilities restricted to large animals only).
- Requirements if animals are retained for treatment or hospitalization.
- * Lighting requirements.
- * Safety and Sanitation; Medical capacity. The disposal of waste material shall comply with all applicable state, federal and local laws and regulations.
- * Disposal of hypodermic devices. Any person who is authorized to use hypodermic devices via licensed veterinary facility shall dispose of each hypodermic device used by placing the device directly into a rigid, labeled, leak -proof, puncture-resistant container and the device should not be purposely bent or broken by hand or recapped.
- * Equipment; Sterilization.
- Mobile clinics.

* Mobile units.

Emergency veterinary hospitals.

"Emergency Veterinary Hospital" means an animal hospital which primarily provides emergency treatment to an ill or injured animal.

"24-hour Emergency Veterinary Hospital" includes veterinary facilities which utilize the terms "Emergency Hospital", "Open 24 hours", "Day or Night Care", or other phrases implying continuously available treatment.

The emergency veterinary hospital which provides emergency treatment should refer the case and all pertinent records back to the owner's regular veterinarian, or a veterinarian of the owner's choice, as soon as practical after the emergency treatment has been concluded.

Veterinary clinic certification fees are intended to fully fund the certification program, per Section 1, Senate File 419, 2000 Acts.

Fees for a three year certification are \$100.00 per facility.

Budgetary Issues:

The Iowa Department of Agriculture and Land Stewardship (IDALS) provides clerical, administrative, and investigation/inspection support services for the Board. These responsibilities are funded out of general fund appropriations to the Regulatory Division, Animal Industry Bureau, of IDALS.

The Attorney General's Office provides legal support to the Board.

Senate File 419 allows the department to retain fees collected during the fiscal year of July 1, 2001 to June 30, 2002. The statute allows any monies remaining in the fund at the end of the fiscal year to be carried over to the subsequent year. For the fiscal year beginning July 1, 2002, and fiscal years thereafter, all fees are to be deposited in the general fund and the certification program must be funded by appropriation from the general fund.

A budget was developed to provide personnel and supplies for clerical implementation of the program.

<u>/s/</u>

Dr. Donald Jacobi, Chair Iowa Board of Veterinary Medicine Veterinarians are accredited by the USDA after they attend

state.

VETERINARY ACCREDITATION PROGRAM Dr. Kevin Petersburg, USDA AVIC

161.3.

State governments

a core orientation class while in their 3rd or 4th year of veterinary medical school, graduate, become licensed by the State, and apply to the Area Veterinarian in Charge in the state in which they intend to practice. After becoming accredited in one state a veterinarian can simply send a letter (requesting accreditation) to the AVIC in other states in which he/she wishes to become accredited. It is important to remember that you should not begin performing the functions of an accreditated veterinarian until you receive a letter from the AVIC indicating that you have been accredited in that

Accredited veterinarians cooperate with the Animal and Plant Health Inspection Service (APHIS) and State Animal Health Officials in controlling and preventing the spread of animal diseases throughout the country and internationally. Accredited veterinarians use their professional training in veterinary medicine to perform certain regulatory tasks such as issuing certificates of veterinary inspection or collecting blood samples to be tested in State/Federal Cooperative Programs.

APHIS is responsible for defining the scope of the veterinary accreditation program. APHIS provides information and education regarding the program to veterinary practitioners, cooperating State governments, international partners, and the public. In addition, APHIS is responsible for enforcement of the "Standards for Accredited Veterinarian Duties" contained in Title 9 Code of Federal Regulations, Part

have a role in the veterinary accreditation program through licensing and through dissemination of information regarding accreditation to veterinary practitioners. State Animal Health Officials (SAHO) have a participatory role in the development and implementation of the core and supplemental orientations. They also have a consultative role in the adjudication of veterinary violation cases.

Veterinarians may not conduct work requiring accreditation before they have completed all accreditation processes.

If you would like information on how to become an accredited veterinarian in the state of Iowa, please contact either the Iowa Dept. of Agriculture and Land

Visceral Leishmaniasis in North America- A Multi-Site Outbreak in Dogs

Beginning in the late summer of 1999, foxhounds at a hunt club in Dutchess Co., NY (Hunt Club A), developed illness with manifestations that included bleeding, wasting, seizures, hair loss, skin lesions, kidney failure, and swollen limbs and joints; there were several deaths. Cytopathologic examination of joint fluid of one of the hounds revealed amastigote forms of Leishmania spp. This was confirmed at autopsy of several dogs, and organisms were isolated and grown in culture. Serodiagnostic screening of foxhounds at the NY kennel revealed a high rate of leishmanial seropositivity (39/93, 42%) and aspiration or biopsy of lymph nodes and other tissues of 15 seropositive dogs resulted in isolation of Leishmania spp. from all 15; the organism was typed as Leishmania of the species complex donovani. Tests to demonstrate infection in dogs in neighboring hunt clubs in Dutchess County, NY, and in pet dogs, horses, and wild rodents in the vicinity of the affected kennel have been negative. Leishmaniasis is an important zoonotic infection and dogs are reservoirs of vectorborne transmission in other

countries, but there have been no cases of autochthonous human visceral leishmaniasis reported in the United States. Investigations have continued since April 2000 to identify infections in dogs and other potential hosts, to determine how the infection is being transmitted, and to determine the potential public health significance.

Serologic screening of foxhounds in numerous states has revealed evidence of more widespread infection. Through (July 14, 2000), sera from nearly 7,000 foxhounds and other hunting dogs had been tested and 848 (12.4 %) had titers at or above the cutoff (=>1:16). High titers (>=1:128) have been found in 83 (1.2%) of the tested dogs. Positive seroreactive foxhounds have been detected in 19 states and Ontario, Canada. Tissue specimens collected from dogs in at least 5 states and Ontario have grown organisms which have been typed as L donovani sensu lato. Most of the culture positive dogs have had the higher titers but the organism has been isolated from dogs with titers as low as 1:32. Sera from 455 dogs of other

breeds not associated with the foxhounds have all tested negative (<1:16). The Masters of Foxhound Hunters
Association has recommended a temporary cessation of interstate movement of foxhounds pending the collection of more detailed information on the extent of this infection and its mode of transmission.

The routes of transmission in these dogs are unclear. Leishmaniasis is transmitted under most conditions by sand fly vectors (Family Phlebotomidae). Species of sand flies known to transmit L. donovani have not been identified in the areas investigated, however, vector surveys are still limited. Preliminary observations suggest that direct dog-todog transmission may be occurring. Foxhounds commonly live in close contact with each other and the annual cycle of hunting activities bring dogs from different states together. To date there have been no documented autochthonous cases of visceral leishmaniasis in humans in the United States. Although direct transmission from an infected dog to humans has never been reported, it is speculated to

Release of Slaughter Cows From Auction Markets

All slaughter cows moving from auction markets must be released with proper documentation.

Cows moved to an auction market with the intended purpose of moving directly to slaughter must be identified with a USDA Market Cattle Testing (MCT) program tag. A slaughter affidavit shall be completed for each dealer purchasing the slaughter cows intended for immediate slaughter. The purpose and importance of proper procedure is to assure the identification of individual cows and bulls at slaughter for tracing to herds of origin.

Cows intended for slaughter at auction markets that are purchased for further feeding purposes must be officially identified as individuals, **blood tested negative for brucellosis**, and released on a certificate of inspection. Again, the purpose and importance of proper procedure is to provide future traceability to the herd of origin.

Cows and bulls, occasionally, are positive on slaughter testing for brucellosis. If proper identification is not present on suspects, it may mean several producers, rather than the one herd, may have to do complete herd brucellosis blood testing. Iowa has attained brucellosis "free" status. Slaughter surveillance is still a requirement and all brucellosis suspects must be investigated.

Currently, the only remaining brucellosis class "A" states remaining are Florida, Missouri, Oklahoma, and Texas. All other states have attained brucellosis free status. Your efforts have brought us significantly closer to eradicating brucellosis from this country.

Iowa Swine Movement Surveillance

With advent of the new pseudorabies regulations implemented in calendar year 2000 surveillance of proper movement of swine had to be implemented. This has been no small undertaking, considering the fact there are 63 auction markets, 200 plus buying stations, and 15 USDA

News From Dr. Schmitt

Assistant State Veterinarian

licensed swine processing plants.

All concentration points in Iowa have been contacted about the proper movement requirements for swine from Stage II counties. There assistance and support in the eradication of pseudorabies from the state of Iowa is essential.

Implementing surveillance of swine movement at all concentration has helped in the dissemination of current pseudorabies eradication information at the concentration points.

Currently, the five Iowa Livestock Inspectors and one USDA Animal Health Technician have been stopping at each of the concentration points and reviewing lists of sellers compared to pseudorabies testing date information lists. The inspectors then verify all out-of-date tests with the producer and/or the producer's veterinarian. This is to assure compliance action is not warranted if a current pseudorabies test has been completed for the site from which the swine originated.

In addition, backtagging and proper identification of swine at concentration points is inspected. Backtagging retention of sows and boars is surveyed and reviewed with the responsible individual at each site. This has increased the retention of backtags on sows and boars. As a result, more sows and boars are being blood tested for pseudorabies at slaughter. Surveillance of sows and boars at slaughter for pseudorabies is important to finding infected sites.

Animal Welfare

Did you know the Iowa Department of Agriculture and Land Stewardship (IDALS) oversees the licensing and registration of 1,539 facilities?

Iowa Code of Law chapter 162 defines who and what type of enterprise must be licensed or registered. This includes commercial breeders, commercial kennels (grooming, boarding, training), pet shops, pounds,

animal shelters, privately-owned pound, dealer, research facility, registered federal dealer, boarding kennel, public auction and greyhound breeders. All facilities registered with the United States Department of Agriculture (USDA) must register with IDALS but inspections of federal licensed facilities are completed by USDA inspectors.

All state licensed facilities are inspected by five area inspectors. Each facility licensed with the state of Iowa is responsible for complying with Iowa Code chapter 162 and Animal Welfare rules listed in the Iowa Administrative Code chapter 67. This is a huge task given the fact inspection of these state licensed facilities is only one of the duties the inspectors are responsible for.

The care of companion animals either by private owners or business entities continues to fall under scrutiny by concerned individuals and several organizations aligned to protect their well being. It is important to know who needs to be licensed and how. If you have a





Voluntary Chronic Wasting Disease (CWD) Surveillance Program for Cervidae

The State Veterinarian's Office, in cooperation with the Iowa Elk Breeders Association, has implemented a voluntary Chronic Wasting Disease (CWD) Surveillance Program for Cervidae in Iowa.

Chronic wasting disease (CWD) is a transmissible spongiform encephalopathy (TSE) of deer and elk that has occurred in limited areas in the Western United States. CWD was first recognized as a clinical syndrome in 1967 and it is typified by chronic weight loss leading to death. There is no known relationship between CWD and any other spongiform encephalopathy of animals or people.

CWD has occurred in animals at two captive wildlife research facilities (Colorado and Wyoming). Cases of CWD have been seen in two zoological parks more than 10 years ago. The affected animals all originated from the research facilities. CWD has been confirmed in free-ranging deer and elk in a limited geographic area within Colorado and Wyoming. Recently, CWD was diagnosed in wild mule deer in Nebraska. CWD has also been diagnosed in several farmed elk herds in five states and Canada.

Species that have been affected with CWD are Rocky Mountain elk, mule deer, white-tailed deer, and black-tailed deer. Other ruminant species, including wild ruminants and domestic cattle, sheep, and goats, have been housed in wildlife facilities in direct or indirect contact with CWD-affected deer and elk. No cases of CWD or other TSE's have been detected in these other ruminant species. There is ongoing research to further explore this possibility.

Clinical Signs. Most cases of CWD occur in adult animals. The disease is progressive and always fatal. The most obvious and consistent clinical sign of CWD is weight loss over time. Behavioral changes also occur in the majority of cases, including decreased interactions with other animals in the pen, listlessness, lowering of the head, blank facial expression, and repetitive walking in set patterns within the pen. In elk, behavioral changes may also include hyperexcitability and nervousness. Affected animals continue to eat grain but may show decreased interest in hay. Excessive salivation and grinding of the teeth are seen. Most deer show increased drinking and urination.

Diagnosis. Research is being conducted to develop live-animal diagnostic tests for CWD. Currently, definitive diagnosis is based on necropsy examination and testing. Gross lesions seen at necropsy reflect the clinical signs of CWD, primarily emaciation and aspiration pneumonia, which may be the cause of death. On microscopic examination, lesions of CWD in the central nervous system resemble those of other spongiform encephalopathies. Immunohistochemistry is also used to detect the presence of the protease-resistant prion protein.

Epidemiology. The origin and mode of transmission of CWD is unknown. Animals born in captivity and those born in the wild have been affected with the disease. Based on epidemiology of the disease, transmission is thought to be lateral and

possibly maternal. However, Dr. Michael Miller of the Colorado Division of Wildlife compared four disease transmission models against an eight-year data set for CWD cases in his agency's captive mule deer herd. He found the best fit was environmental contamination coupled with latent (silent) infections. Dam-to-offspring and direct animal-to-animal models of transmission did not fit the data set. Transmission by feed is not believed to occur as affected animals have been fed a wide variety of feedstuffs.

Colorado and Wyoming wildlife management agencies are continuing to invest resources in CWD research efforts. In addition, the Colorado Division of Wildlife is currently developing a management plan for CWD in free-ranging cervids. These agencies are committed to limiting the distribution of the disease to the current localized area and decreasing its occurrence in the deer and elk population.

Surveillance. Surveillance for CWD in Colorado and Wyoming has been ongoing since 1983, and to date, has confirmed the limits of the endemic areas in those States. An extensive nationwide surveillance effort was started in 1997-98 to better define the geographic distribution of CWD. This surveillance effort is a two-pronged approach consisting of hunter-harvest cervid surveys conducted in Arizona, Colorado, Idaho, Kansas, Michigan, Montana, Nebraska, Nevada, New Jersey, South Dakota, Utah, and Wyoming, as well as surveillance throughout the entire country targeting deer and elk exhibiting clinical signs suggestive of CWD.

In the free-ranging population, from over 5,000 samples examined, there have been approximately 110 clinically affected deer and elk identified over the last 10 years. The majority of those affected were mule deer. Again, there have been no free-ranging animals found to be positive that did not originate from the endemic areas.

Iowa's Program. Iowa has adopted a voluntary certification program incorporating inventory reconciliation, surveillance of all deaths of cervids over eighteen months of age, and tightened import / intrastate movement restrictions. The program began October 11, 2000, when the rules became effective. This was a cooperative effort between the Iowa Elk Breeders Association and the Iowa Department of Agriculture and Land Stewardship. This program will assist in safeguarding the industry against introduction of the disease, as well as increasing the marketability of herds electing to participate in the certification program. Numerous other states have enacted or are considering import restrictions relative to CWD.

Currently, 32 herds have enrolled in the voluntary program.

The new movement rules are:

21—64.186(163) Intrastate movement requirements.

64.186(1) All intrastate movements of

Cervidae other than to a state or federally inspected slaughter establishment shall be accompanied by an intrastate movement certificate of veterinary inspection signed by a licensed, accredited veterinarian.

64.186(2) Such intrastate movement certificate shall include all of the following:

- a. Consignor's name and address.
- b. Consignee's name and address.
- c. Individual identification of each animal by an official ear tag.
- d. The following statement: "There has been no diagnosis, signs, or epidemiologic evidence of CWD in this herd for the past year."

21-64.187(163) Import requirements.

64.187(1) All Cervidae entering Iowa must be accompanied by all of the following:

- a. An official certificate of veterinary inspection.
- b. A permit number requested by the licensed, accredited veterinarian signing the certificate and issued by the state veterinarian prior to movement.
- c. One of the following statements must appear on the certificate:

"All Cervidae on this certificate have been part of the herd of origin for at least one year or were natural additions to this herd. There has been no diagnosis, signs, or epidemologic evidence of CWD in this herd for the past year"; or "All Cervidae on this certificate originate from a CWD monitored or certified herd in which these animals have been kept for at least one year or were natural additions. There has been no diagnosis, signs, or epidemologic evidence of CWD in this herd for the past year."

For participating herds, all deaths of cervidae 18 months of age or older are required to be submitted for testing. NVSL is accepting and testing specimens for no cost. Sample preparation and submission is critical. Specimens must be submitted on a federal form (VS Form 10-4) and requires Dr. Kevin Petersburg's approval. District veterinarians should be able to supply you with forms and submission instructions.

The new rules are being posted on the department's web site. If you have any questions or would like additional information, please contact the State



Cuba reported on January 15, 2001 an outbreak of rabbit hemorrhagic disease in Havana and Havana City province. The outbreak was in an operation that produced rabbits for private consumption. Cuba's last reported outbreak was in 1997. No exports of rabbits, rabbit meat, or skins were reported from Cuba in 1998 or 1999 (United Nations FAO). In addition, no imports into the US, Canada, or Mexico of live rabbits or rabbit products from Cuba have been reported through November 2000 (World Trade Atlas). As part of APHIS-PPQ,s Agriculture Quarantine Inspection Monitoring, 184 air passengers from Cuba were inspected in 1999 for items of agricultural interest. Of these, four were found to be carrying some type of meat item, though none of these were listed as being of rabbit origin.

You may recall that the Iowa Department of Agriculture and Land Stewardship, in cooperation with the United States Department of Agriculture and Iowa State University College of Veterinary Medicine, investigated an acute viral disease affecting domestic rabbits. Diagnostic work conducted at Iowa State University, and confirmed through the Foreign Animal Disease Diagnostic Laboratory at Plum Island, diagnosed the illness as Rabbit

Rabbit Hemorrhagic Disease in Cuba

Calicivirus Disease. The diagnosis was further confirmed at a laboratory in Spain. Rabbit Calicivirus Disease was not known to affect the United States and the case was handled as a foreign animal disease introduction.

Rabbit Calicivirus Disease (RCD), also known as Viral Hemorrhagic Disease of Rabbits, is a highly infectious, contagious viral disease that affects rabbits. American cottontail and jack rabbits are not susceptible to infection. Once this disease is introduced into a colony, it can spread rapidly, affecting up to 80% of the rabbitry and killing 90% or more of the rabbits becoming ill. There is no treatment for the disease. Rabbit Calicivirus Disease is not known to harm humans or other animals.

The single case in Iowa involved a colony of domestic rabbits maintained as pets in Crawford County. The colony originally consisted of 27 rabbits. 25 rabbits died of the illness. The rabbits exhibited unremarkable symptoms prior to their acute death. The only reported symptom was that the rabbits may have appeared reluctant to move the evening prior to finding them dead in the morning. The source of the infection was not determined. The premises was quarantined by state officials.

A private practice veterinarian

forwarded samples to Iowa State University Veterinary Diagnostic Laboratory in March, 2000. Rabbit

Calicivirus or toxic hepatopathy was suspected based on the clinical history and the microscopic lesions in the liver.

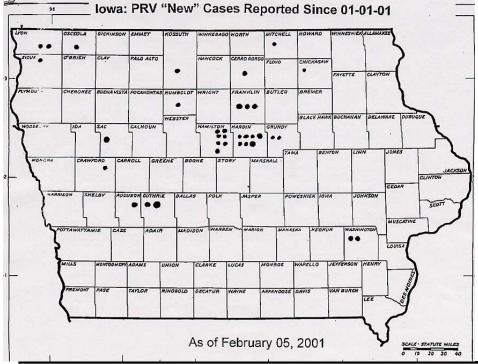
Rabbit Calicivirus was first reported in 1984 in the People's Republic of China. The disease has been reported in parts of Asia and Europe, including the Czech Republic, Germany, France, Italy, Korea, and Spain.

Rabbit Calicivirus is a highly contagious virus. The disease can be transmitted by contact with infected rabbits, rabbit products, and contaminated objects. The incubation period for the disease is 24 to 48 hours. Typically, rabbits die suddenly within 6 to 24 hours of the onset of fever with few clinical signs. Most animals appear depressed or reluctant to move in the final hours and may show a variety of neurological signs. Some affected rabbits may have a foamy nasal discharge.

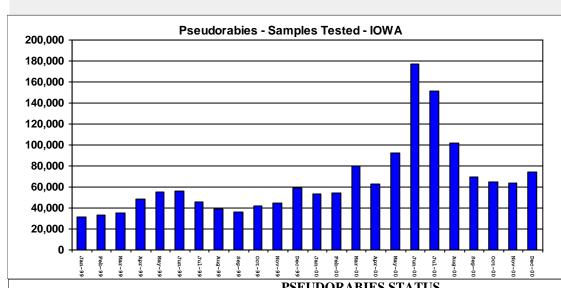
Veterinarians and producers who suspect a foreign animal disease should immediately contact State or Federal animal health officials.

John J. Schiltz, D.V.M. State Veterinarian (515) 281-5305

Kevin Petersburg, D.V.M.



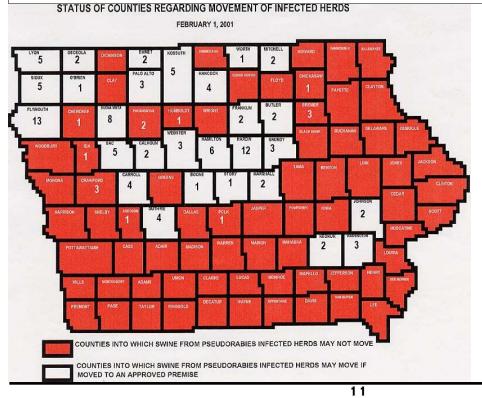
This map represents the county location of pseudorabies test charts received with positive results. Not all of these sites may wind up being classified as infected. This map helps us focus our efforts at areas with circulating virus as evidenced by multiple positive test charts from the same area (see Hamilton-Hardin county areas).



Level of testing conducted at Iowa State University Veterinary Diagnostic Lab. The level of samples tested more than doubled from 1999 to 2000. As surveillance activities are enhanced in 2001. we expect the level of testing to remain very high. ISU VDL has done an excellent job dealing with the tremendously increased workload - Thanks!

Animal Industry News

PSEUDOKABIES STATUS								
Stage II/III	Stage III/IV	Stage IV	Stage V	Stage V, cont.	Stage V, cont.	Stage V, cont.		
Iowa	Illinois	California	Alabama	Kansas	New Mexico	South Carolina		
	Indiana	Massachusetts	Alaska	Kentucky	New York	US Virgin Islands		
Stage III	Minnesota	Nebraska	Arizona	Maine	North Carolina	Utah		
Florida	New Jersey	South Dakota	Arkansas	Maryland	North Dakota	Vermont		
Louisiana	Tennessee		Colorado	Michigan	Ohio	Virginia		
Texas			Connecticut	Mississippi	Oklahoma	Washington		
			Delaware	Missouri	Oregon	West Virginia		
			Georgia	Montana	Pennsylvania	Wisconsin		
			Hawaii	Nevada	Puerto Rico	Wyoming		
			Idaho	New Hampshire	Rhode Island			



Red (dark) counties have achieved zero percent prevalence on or after March 1, 2000.

Number of infected herds in each county on February 1, 2001

(Continued from page 1)

The objectives to be accomplished with the funding are: (1) To provide a subsidy to

State Vet's Column, cont.

together a proposed program which was forwarded to the Iowa Board of Veterinary Medicine. The Board used the IVMA report to

encourage testing of Iowa dairy herds for the presence of Johne's Disease, (2) To educate producers about Johne's Disease and its potential impact on their cattle operation, (3) To recognize Iowa dairy cattle herds, through statistical sampling, which have demonstrated a low risk of Johne's Disease, (4) To work with the Iowa dairy cattle industry, and other impacted industries, to cooperatively develop a Johne's control program for Iowa dairy producers, (5) To form an Iowa Johne's Advisory Committee to aid in policy and program development, and (6) To develop demonstration farm projects in conjunction with the ISU College of Veterinary Medicine. I would encourage you to contact your legislator to support this initiative and begin addressing Johne's Disease in Iowa dairy herds.

fulfill an obligation to report on a proposed certification program to the legislature. The legislature will review the report from the Board and then decide whether to proceed with the proposal. The Board will have to implement any program through the administrative rules process, which would delay implementation until late 2001-early 2002. If this program goes forward, there will be additional opportunities for your input.

Check out our Web Site. We have been working at updating and improving our web site – check it out – (www.state.ia.us/agriculture). You will find: Animal Admission Requirements, numerous maps relating to various aspects of the pseudorabies program, 2001 exhibition regulations, etc. We still intend to have a page for the Iowa Board of Veterinary Medicine. We will continue to try to improve this site and provide useful and requested information. I hope to have the newsletter posted on the site. Another web site that you may find useful is (www.aphis.usda.gov/vs/sregs) – this site has the import regulations for all states.

CWD. The department has initiated a voluntary surveillance program for Chronic Wasting Disease (CWD). The elk industry in Iowa has been very proactive with respect to animal health issues. CWD, a transmissable spongiform encephalopathy, has emerged as a very important disease in this industry. A number of states have begun requiring an active surveillance program as a condition of allowing the importation of animals from producers. The program is voluntary and for those electing to participate requires annual inventory reconciliation of animals, submission of samples from all animals 18 months of age or older which die, and changes the import/intrastate movement requirements. These new requirements are posted on our web site.

Veterinary Clinic Certification. Senate File 419 was passed last session. This legislation may require the certification of all vet clinics in Iowa. The IVMA established a task force to put



In This Issue...

2001 Exhibition Regulations, Pseudorabies Update, Enforcement Actions, Vet Board summary, and more.



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